

THE UNITED REPUBLIC OF TANZANIA  
MINISTRY OF WATER AND IRRIGATION



WATER INSTITUTE

Ref No: **WI/ADM.O/2017/18/BWRE 1**

Date : 04th October 2017

TO: .....

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RE: OFFER OF ADMISSION INTO BACHELOR OF WATER RESOURCES AND IRRIGATION ENGINEERING PROGRAMME 2017/18 INTAKE (Four Years).

I am pleased to inform you that you have been offered a place at the Institute (WI) to pursue Bachelor's Degree in Water Resources and Irrigation Engineering Programme. This is a four years programme as approved by TCU.

Tuition fee for the programme is **1,295,000 Tsh** per year. You are expected to pay the tuition fee by Monday 23<sup>rd</sup> October 2017 either in full / at once at the beginning of the first semester or in two installments; the first at the beginning of the first semester (**770,000 Tsh**) and the rest at the beginning of the second semester as displayed in the attached joining instruction document. In addition to the tuition fee there are other recommended costs (see attached joining instruction document item no. 12 'Summary of costs to be met by each student').

Registration will be done on Monday, 23<sup>rd</sup> October, 2017 to Friday, 27<sup>th</sup> October, 2017 at 08.00 hrs to 15.30hrs at the Institute. Classes will start on Monday 30<sup>th</sup> October, 2017.

You are required to complete all registration process within one week stated above; failure to do that will consequently lead to your place being given to another applicant. This offer is valid for 2017/18 intake only. For the purpose of registration exercise, you must bring the following:

1. Original and certified photocopies of the certificates of the secondary school education, advanced certificate of secondary school education and certificate/diploma.
2. Three up-to-date colored passport size photograph bearing your name and course of study at the back.
3. WI receipt of payment with a minimum of 770,000 Tsh. of tuition fee.
4. Original and certified photocopy of birth certificate.

All payment should be made through WI Account No. 22501000004 NMB,

Please note that this offer is conditional upon you fulfilling all the registration requirements on time.

Dr. Shija Kazumba

Rector

Attachment: WI – Bachelor Degree - Admission - Joining instructions FY 2017 / 2018

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**P. O. Box 35059 Dar es salaam, Tanzania, University Road**

Tel. +255 22 241 0040, Fax: +255 22 241 0404, E-mail: [rector@wdmi.ac.tz](mailto:rector@wdmi.ac.tz), Website: [www.waterinstitute.ac.tz](http://www.waterinstitute.ac.tz)

#### **1. ACCOMMODATION:**

The institute has very limited accommodation available for few Ordinary diploma students. For bachelor degree you are advised to find your own accommodation.

#### **2. TUITION FEES**

As a privately-sponsored student, you will be required to pay an annual fee of **1,295,000** (One million two hundred ninety five thousand) which will be used to cover study expenses. At least **TZS 770,000** has to be paid at the beginning of the first semester. The rest has to be paid at the beginning of the second semester. For those who can afford can pay the whole amount at the beginning of the first semester.

#### **3. DRESSING**

The Institute does not have a standard (uniform) dress, but students are expected to dress respectably at all times when they are at the Institute and when going out under the name of the Institute in other formal academic activities such as study tours, industrial/field practical training attachment, etc.

#### **4. TRAVELLING COSTS**

You will be paying for your travelling costs when coming to the Institute and during your vacations.

#### **5. MEDICAL COSTS**

The Institute has a dispensary that provides medical consultancies and treatment of common diseases. Students have to pay partially for medical services provided by this dispensary. Every student is required to pay **TZS 10,000** (ten thousand) at the beginning of the first semester and the same amount at the beginning of the second semester which is contribution toward cost of medical care. The money is **not refundable**. Any medical cases that cannot be attended by the Institute dispensary are referred to competent Government Hospitals in the City of Dares Salaam. The students who do not possess Medical insurance **MUST** pay TZS.50,400/= (fifty thousand four hundred shillings only) for health insurance at the beginning of the year.

#### **6. STUDY MATERIALS**

Each student has to bear the costs of stationery materials; scientific calculator; laboratory, workshop or field studies clothing and footwear, etc.

#### **7. LIBRARY FEES**

Students have to pay an annual library fee of **TZS 10,000** (Ten thousand) for Library membership. Membership to the institute library is mandatory.

#### **8. CAUTION MONEY**

This applies to new students only. Each student shall be required to deposit **TZS 30,000** (thirty thousands) as a collateral security that shall be used to recover lost or damaged Institute property. This amount shall be reimbursed at the end of the course if the student committed no loss or damage.

#### **9. IDENTITY CARD**

This applies to all new students. Each student shall be required to bring three recent passport size colour photographs, and to pay **TZS 15,000** (fifteen thousand) for the production of the student's identity card. One of the photos shall be used in the ID card, and the rest shall be for other official uses.

#### **10. STUDENTS' UNION MEMBERSHIP FEES**

There is a students' union known as "**Water Institute Students' Organisation**" (WISO). Your registration as a student of this Institute entitles you to automatic membership to this students union. You shall, therefore, be obliged to contribute to this organization by paying a non-refundable membership fee of **TZS 5,000** (five thousands only) at the beginning of the first semester FY 2017/18 which is valid until completion of NTA 8 studies and annual contribution of **TZS 15,000** (fifteen thousands only) at the beginning of first semester in every year of study as annual contribution to WADEMISO. Annual contributions will continue in NTA 7 and NTA 8 studies.

## 11. REPORTING DATE

The orientation and registration week for **2017/2018** new students will start on the **23<sup>rd</sup> October, 2017**. First semester studies will begin on **30<sup>th</sup> October, 2017**. You will not be accepted at the Institute if you report later than **10<sup>th</sup> November 2017**. Your place will be given to someone else on the waiting list. If, for any reason, you decide or you are obliged by circumstances to postpone your registration to the subsequent year, put it clearly in writing at least one week before first semester studies begin and after paying (**TZS 770,000**) of the tuition fee. Failure to do that will result into loss of your place at this Institute.

## 12. SUMMARY OF COSTS TO BE MET BY EACH STUDENT:

### A. PAYMENT DIRECT TO THE INSTITUTE - WI (IN TANZANIAN SHILLINGS) Cash

will NOT BE accepted. Pay through the Bank to:

**Name of Account:** Water Institute

**Number of Account:** 22501000004

**Bank:** NMB, Mlimani City Branch, Dares Salaam

S/N		1 <sup>st</sup> year (NTA 7-1)	2 <sup>nd</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup> year (NTA 7-2, 7-3 & NTAS)
1	Registration fees	20,000	20,000
2	Tuition fee	1,050,000	1,050,000
3	Medical costs capitation (non-refundable)	20,000	20,000
4	Library membership fees	10,000	10,000
5	Examination fees	120,000	120,000
6	Caution money	30,000	0
7	Student's identity card	15,000	0
8	Students' Union membership Fee	5,000	0
9	Students' union annual contribution	15,000	15,000
10	Students' relief fund	10,000	10,000
	<b>Total</b>	<b>1,295,000</b>	<b>1,245,000</b>

Note:

All students who do not possess healthy insurance card MUST pay 50,400/= for Health insurance at the beginning of the year.

**NB.** Payments of fees and other financial dues to the Institute must be through the Bank. You must submit original pay-in slip of the Bank (duly signed, stamped and dated) as evidence that you have paid fees and other financial dues to the Institute through **the Bank**. Whichever Bank you use to deposit the money, payment should be in favour of Account Name: Water Institute, Account Number: 22501000004, Bank: NMB,. You can pay the annual fees and other financial dues at once at the beginning of the first semester or in two installments, the first at the beginning of the first semester, and the last at beginning of the second semester the as described in the joining instructions. **You will not be accepted if you do not submit the pay-in slip on the date you arrive at the Institute.**

## B. Payment Direct to the Student by the Sponsor

The parent/ guardian/ sponsor should give the student sufficient money for meeting the following costs as described below:

S/N	Description	1 <sup>st</sup> year (NTA7-1)	2 <sup>nd</sup> & 3 <sup>rd</sup> year (NTA7-2&NTA7-3)	4 <sup>th</sup> year (NTA 8)
1	Meals and Accommodations: Fresh student – 7500Tsh/dayX7daysX35wks/year. Continuing student – 7500Tsh/dayX7days/wkX34wks/year	1,837,500	1,785,000	1,785,000
2	Special faculty requirements	300,000	300,000	300,000
3	Books and stationery items	200,000	200,000	200,000
4	Industrial Practical Training (IPT) allowances - 10,000 Tsh/day x 70 days	<b>700,000</b>	<b>700,000</b>	0
5	IPT Transport allowances*	100,000	100,000	0
6	Project work**	0	0	620,000
	<b>Total</b>	<b>3,137,500</b>	<b>3,085,000</b>	<b>2,905,000</b>

These amounts are only indicative. The parent/ guardian/ sponsor have the liberty to give the student larger amounts. \*

Varies depending on distance travelled and means of transport used

\*\* Varies depending on nature of work performed (logistics, equipment, materials, supplies and services requirements

You are most welcome.



Ref no: WI/ADM.J/2017/2018/BWRIE 1

Date : 04<sup>th</sup> October 2017

TO: Medical Officer In-Charge

..... Hospital

P. O. Box .....

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**SUB: Medical Examination Report In Respect Of Prospective Students About To Join Bachelor Degree in Water Resources and Irrigation Engineering course in Year 217/2018**

Please provide us the assistance of carrying out medical examination on Mr. / Mrs. / Miss\*

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and report to us the results of the examination using the attached form. The examination report is important to us as it provides us with medical criteria for accepting him/ her if s/he is medically fit, or rejecting him/ her if s/he has a serious medical condition which will prevent him/ her from gainful participation in learning activities and undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training, or accepting him/ her with the full knowledge that s/he has a medical condition which is not very serious but which requires close monitoring. S/he has been selected for admission to the four-year Bachelor Degree Programme in Water Resources and Irrigation Engineering.

We thank you for the expected cooperation.

\*Delete whichever is inappropriate.

Dr. S. Kazumba

RECTOR

Attachments:

WI – OD - Admission – Medical Examination Report

## WI – BD - Admission – Medical Examination Report

Admission of students to Bachelor Degree in Water Resources and Irrigation Engineering at Water Institute is conditional upon receipt of satisfactory medical report from a Medical Practitioner. The Medical Officer is requested to fill in a detailed diagnostic medical report of the candidate as required in the form. The form should then be posted back to the Institute early enough so that it is received at least two weeks before the student reports to the Institute\*. Orientation and registration shall be done from 23<sup>rd</sup> October 2017 to 28<sup>th</sup> October 2017. Lesson for semester 1 shall begin on 30<sup>th</sup> October 2017. The last date for registration for semester 1 studies is 10<sup>th</sup> November, 2017. The address to be used is:

*The Rector*  
*Water Institute*  
*P. O. Box 35059*  
**DAR ES SALAAM**

*\*The duly filled and signed form should preferably be posted, but if that is inconvenient, it can be given to the candidate who will bring it to the Institute. In both cases it must be sealed in double envelopes. The inner envelope should be marked "Attention to the rector, Water Institute – Medical Report"*

### **A. Candidate's Particulars:**

- SURNAME: .....
- OTHER NAMES: .....
- AGE: .....years
- Height: .....cm
- Weight: .....kg

### **B. General examination**

Has the candidate ever suffered, or is s/he suffering from any of the following medical conditions? (*Delete Whichever Is Inapplicable*)

- Tuberculosis.....Yes / No
- Epilepsy..... Yes / No
- Anaemia..... Yes / No
- Leprosy..... Yes / No
- Peptic Ulcers..... Yes / No
- Bronchial asthma..... Yes / No
- Hypertension..... Yes / No
- Dysmenorrhea..... Yes / No
- Diabetes Mellitus..... Yes / No
- Psychosis..... Yes / No
- Sickle cells..... Yes / No

Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes /No). If yes, please explain

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### **C. Skin examination**

Condition of the skin: any disease or abnormality? (Yes / No), If Yes, please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful

participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes / No). If yes, please explain

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**D. Head examination**

- Condition of ears: any disease or abnormality? (Yes / No), If Yes, please explain

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- Condition of mouth and throat: any disease or abnormality? (Yes/ No), If Yes, please explain

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- Condition of the nose: any disease or abnormality? (Yes / No), If Yes, please explain

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- Condition of the eyes including refractive capability: any disease or abnormality? (Yes / No), If Yes, please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes /No). If yes, please explain

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**E. Thorax examination**

- Condition of the trachea: any disease or abnormality? (Yes / No), If Yes, please explain

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Condition of lungs: any disease or abnormality? (Yes / No), If Yes, please specify

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes /No). If yes, please explain

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**F. Cardiovascular system examination**

- Condition of the heart and blood circulation system (cardiovascular system - blood pressure, heart beats, arteries, veins, haemoglobin concentration, blood group, etc): any disease or abnormality? (Yes / No), If Yes, please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes / No). If yes, please explain

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**G. Abdomen examination**

Has the candidate ever suffered, or is s/he suffering from any of the stated medical conditions or are any of the stated organs affected by a disease or are abnormal in any way?

- Hernia: (Yes / No)  
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- Hydrocele: (Yes / No)  
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- Masses: (Yes / No)  
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- Liver: (Yes / No), If yes please explain  
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- Spleen: (Yes/ No), If yes please explain  
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- Kidney: (Yes/ No), If yes please explain  
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- Rectum: (Yes/ No), If yes please explain  
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- Hyperacidity or gastric - duodenal ulcer: (Yes / No), If yes please explain  
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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes /No). If yes, please explain

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**H. Laboratory Examination**

Please give results for the following laboratory examinations

- **Urine:**
  - ✓ Albumen .....
  - ✓ Sugar .....
  - ✓ Leukocytes .....
  - ✓ Bilharziasis .....
  - ✓ Stool (emphasis on Hookworms) .....



- **Blood examination:**
  - ✓ Haemoglobin .....
  - ❖ Differential count: Total WBC.....
    - Neutrophils.....
    - Eosinophils.....
    - Basophils.....
    - Monocytes.....
    - ESR .....
  - ✓ HIV/AIDS.....

Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training or which is contagious and therefore a danger to other people at the Institute? (Yes

/No). If yes, please explain

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**I. Disability examination**

Does the candidate have any physical or mental disability? (Yes / No). If yes please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training? (Yes / No). If yes, please explain

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**J. Chronic diseases**

Does the candidate have any chronic disease or ailment? (Yes / No). If yes please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/ her from gainful participation in learning activities or undertaking assessment activities for determining whether s/he has attained or not the learning objectives specified for the training? (Yes / No). If yes, please explain

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**K. CONCLUSION**

I confirm that I have examined Mr/Mrs/Miss .....

From my findings, and basing on my professional expertise, I declare that (delete whichever is inappropriate):

- o S/he is **medically fit** so s/he **should** be admitted for studies at Water Institute.
- o S/he is **medically unfit**, so s/he **should not** be admitted for studies at Water Institute.

S/he has a recurring ailment of..... which is not contagious and does not prevent him/ her from gainful participation in studies but will require him/ her to be treated frequently while s/he is continuing with studies, so s/he can be admitted to studies at Water Institute.

Name:.....

Title:.....

Qualifications:.....

Signature:.....

Date.....

Official Stamp.....

**NOTE: This report is binding and the Institute will not accept any claim of chronic medical problem, which is not indicated in this form.**